



30448

PATENT TRADEMARK OFFICE

APPLICATION DATA SHEET

Application Information	
Application Number:	
Filing Date:	July 15, 2003
Application Type:	Regular
Subject Matter:	Utility
Suggested Classification:	
Suggested Group Art Unit:	
CD-ROM or CD-R:	
Number of CD disks:	
Number of Copies of Cds:	
Sequence Submission?:	
Computer Readable Form (CRF)?:	
Number of Copies of CRF:	
Title:	HYBRID ELECTRICAL DISCHARGE REACTORS AND THE USE OF ZEOLITES TO ENHANCE THE DEGRADATION OF CONTAMINANTS
Attorney Docket Number:	3303-24
Request for Early Publication:	
Request for non-Publication:	
Suggested Drawing Figure:	
Total Drawing Sheets:	7
Small Entity:	Yes
Petition Included	
Petition Type:	
Licensed US Govt. Agency:	
Contract or Grant Numbers:	
Secrecy Order in Parent Application	

Express Mail No. EU398217625US

{WP141366;1}

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	United States of America
Status:	Full Capacity
Given Name:	Bruce
Middle Name:	R.
Family Name:	Locke
Name Suffix:	
City of Residence:	Tallahassee
State or Province of Residence:	Florida
Country of Residence:	United States of America
Street of Mailing Address:	3476 Welwyn Way
City of Mailing Address:	Tallahassee
State or Province of Mailing Address:	Florida
Country of Mailing Address:	United States of America
Postal or Zip Code of Mailing Address:	32309

{WP141366;1}

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	United States of America
Status:	Full Capacity
Given Name:	Austin
Middle Name:	
Family Name:	Appleton
Name Suffix:	
City of Residence:	West Point
State or Province of Residence:	New York
Country of Residence:	United States of America
Street of Mailing Address:	544A Winans Road
City of Mailing Address:	West Point
State or Province of Mailing Address:	New York
Country of Mailing Address:	United States of America
Postal or Zip Code of Mailing Address:	10996

{WP141366;1}

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Czech Republic
Status:	Full Capacity
Given Name:	Pavel
Middle Name:	
Family Name:	Sunka
Name Suffix:	
City of Residence:	193 00 Prague 9
State or Province of Residence:	
Country of Residence:	Czech Republic
Street of Mailing Address:	Harcovska 1684
City of Mailing Address:	193 00 Prague 9
State or Province of Mailing Address:	
Country of Mailing Address:	Czech Republic
Postal or Zip Code of Mailing Address:	

{WP141366;1}

Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Croatia
Status:	Full Capacity
Given Name:	Natalija
Middle Name:	
Family Name:	Koprivanac
Name Suffix:	
City of Residence:	10000 Zagreb
State or Province of Residence:	
Country of Residence:	Croatia
Street of Mailing Address:	Ilica 181
City of Mailing Address:	10000 Zagreb
State or Province of Mailing Address:	
Country of Mailing Address:	Croatia
Postal or Zip Code of Mailing Address:	

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Applicant Information	
Applicant Authority Type:	Inventor
Primary Citizenship Country:	Croatia
Status:	Full Capacity
Given Name:	Hrvoje
Middle Name:	
Family Name:	Kusic
Name Suffix:	
City of Residence:	10430 Samobor
State or Province of Residence:	
Country of Residence:	Croatia
Street of Mailing Address:	Zagorska 41
City of Mailing Address:	10430 Samobor
State or Province of Mailing Address:	
Country of Mailing Address:	Croatia
Postal or Zip Code of Mailing Address:	

Correspondence Information	
Correspondence Customer Number:	30448
Name:	AKERMAN SENTERFITT
Street of Mailing Address:	222 Lakeview Avenue, Suite 400, P. O. Box 3188
City of Mailing Address:	West Palm Beach
State or Province of Mailing Address:	Florida
Country of Mailing Address:	United States of America
Postal or Zip Code of Mailing Address:	33402-3188
Telephone:	(561) 653-5000
Telefacsimile:	(561) 659-6313
E-Mail Address	

Representative Information		
Representative Customer No.	Registration Number	Name
30448		

Domestic Priority Information			
Application	Continuity Type	Parent Application	Parent Filing Date

Foreign Priority Information			
Country	Application Number	Filing Date	Priority Claimed

Assignee Information	
Assignee Name:	
Street of Mailing Address:	
City of Mailing Address:	
State or Province of Mailing Address:	
Country of Mailing Address:	
Postal or Zip Code of Mailing Address:	

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